



APPENDIX A

Indiana Outdoor Recreation Participation Survey

Indiana Department of Natural Resources - Outdoor Recreation Participation Survey

How important is outdoor recreation to you?

- ☐ Essential ☐ Don't care
☐ Desirable ☐ Undesirable

Are you ...

- ☐ Male ☐ Female

In which age category are you?

- ☐ Under 11 ☐ 45-54
☐ 11-17 ☐ 55-64
☐ 18-24 ☐ 65-74
☐ 25-34 ☐ 75 & over
☐ 35-44

What is your current marital status?

- ☐ Single, never married ☐ Separated
☐ Married ☐ Widowed
☐ Divorced

Do you have any children living at home?

- ☐ Yes
☐ No

Which of the following do you consider yourself to be?

- ☐ White, non Hispanic ☐ Asian
☐ Black/African American ☐ Native Hawaiian/Pacific Islander
☐ Hispanic/Latino ☐ Multi-racial
☐ American Indian/Alaska Native ☐ Other

What is the highest level of education you have completed?

- ☐ 8th grade or less ☐ 1-3 years of college
☐ 1-3 years of high school ☐ Completed college degree
☐ Completed high school ☐ Graduate work or degree
☐ Trade or technical school

Do you consider yourself as having any sort of disability that interferes with participation in outdoor recreation activities?

- ☐ Yes
☐ No

What is your best estimate of your total household income, before taxes, in 2002?

- ☐ Less than \$10,000 ☐ \$50,000-\$74,999
☐ \$10,000-\$19,999 ☐ \$75,000-\$99,999
☐ \$20,000-\$29,999 ☐ \$100,000-\$150,000
☐ \$30,000-\$49,999 ☐ \$150,000 or more

In which Indiana county do you live? _____

- ☐ Do not live in Indiana

Which of the following best describes the community in which you live?

- ☐ Suburb of a metropolitan area ☐ A town between 5,000 & 10,000 people
☐ A city (not a suburb) of more than 500,000 people ☐ A town of less than 5,000 people
☐ A city between 50,000 & 500,000 people ☐ A rural area
☐ A city between 10,000 & 50,000 people



Did you participate in any outdoor recreation activity during the past year? (This may include anything from home gardening and horseshoes to snow skiing and mountain climbing)

☐ Yes

☐ No

Please check each of the activities in each category that you participated in REGULARLY in the last year.

Walking/hiking/jogging

☐ Hiking

☐ Walking for pleasure

☐ Jogging/running

☐ Fitness/rehabilitation

☐ Other

Bicycling

☐ BMX biking

☐ Rail-trail/bikeway corridor riding

☐ Casual riding

☐ Touring

☐ Mountain biking

☐ Competitive riding/road racing

☐ Other

Horseback riding

Motorized vehicle use

☐ Snowmobiling

☐ 4-wheel drive vehicles

☐ ATV's

☐ Motorcycles

☐ Pleasure driving

☐ Other

Nature observation/photography

☐ Gathering (Mushroom, berry, etc.)

☐ Nature photography

☐ Bird watching

☐ Wildlife viewing

☐ Relaxation/aesthetics

☐ Fall foliage

☐ Other

Picnicking

Playground use

Rollerblading/roller skating/skateboarding

Court sports

☐ Horseshoes

☐ Basketball

☐ Tennis

☐ Shuffleboard

☐ Volleyball

☐ Other

Field sports

☐ Baseball/softball

☐ Football

☐ Soccer

☐ Other

Golf

☐ Regulation golf

☐ Driving range

☐ Miniature golf

☐ Par 3

☐ Other

Camping

☐ Backpack/remote camping (Developed or undeveloped)

☐ RV/trailer camping

☐ Tent camping

☐ Car/van/truck camping

☐ Organized camping

☐ Cabins

☐ Other

**Boating/water skiing/jet skiing**

- | | |
|--|---|
| <input type="checkbox"/> Canoeing/rafting/kayaking | <input type="checkbox"/> Power boating (Includes electric & pontoons) |
| <input type="checkbox"/> Sailing/windsurfing | <input type="checkbox"/> Jetskiing/personal watercraft |
| <input type="checkbox"/> Rowing | <input type="checkbox"/> Houseboats |
| <input type="checkbox"/> Water skiing/tubing | <input type="checkbox"/> Other |

Swimming/scuba/snorkeling

- | | |
|---|---|
| <input type="checkbox"/> Pool swimming | <input type="checkbox"/> Scuba/snorkeling |
| <input type="checkbox"/> Swimming at lake, river or beach of any kind | <input type="checkbox"/> Other |

Hunting

- | | |
|--|-------------------------------------|
| <input type="checkbox"/> Fur bearing animals | <input type="checkbox"/> Deer |
| <input type="checkbox"/> Waterfowl | <input type="checkbox"/> Small game |
| <input type="checkbox"/> Turkey | <input type="checkbox"/> Other |

Fishing

- | | |
|---|---------------------------------------|
| <input type="checkbox"/> Lake/reservoir | <input type="checkbox"/> Boat fishing |
| <input type="checkbox"/> River/stream | <input type="checkbox"/> Bank fishing |
| <input type="checkbox"/> Ponds | <input type="checkbox"/> Ice fishing |
| <input type="checkbox"/> Great Lakes | <input type="checkbox"/> Other |

Winter sports

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> Ice skating | <input type="checkbox"/> Snowshoeing/hiking |
| <input type="checkbox"/> Sledding | <input type="checkbox"/> Alpine (downhill) skiing/snowboarding |
| <input type="checkbox"/> Snowmobiling | <input type="checkbox"/> Cross-country skiing |
| <input type="checkbox"/> Hockey | <input type="checkbox"/> Other |

☐ **Trapping****Shooting sports**

- | | |
|---------------------------------------|-------------------------------------|
| <input type="checkbox"/> Clay targets | <input type="checkbox"/> Rifles |
| <input type="checkbox"/> Archery | <input type="checkbox"/> Paint-ball |
| <input type="checkbox"/> Hand guns | <input type="checkbox"/> Other |

☐ **Fairs/festivals**☐ **Remote control (Cars/boats/planes)**☐ **Lawn games (Badminton/lawnbowling)****Where did you participate in this/these activities MOST frequently?**

- ☐ In Indiana
☐ Outside the state of Indiana

If you remember, in which county in Indiana did you participate in this/these activities MOST frequently? _____**If you don't remember what county, to the best of your knowledge, in which region of Indiana did you participate in this/these activities MOST frequently?**

- | | |
|------------------------------------|---|
| <input type="checkbox"/> Northeast | <input type="checkbox"/> Southeast |
| <input type="checkbox"/> Northwest | <input type="checkbox"/> Southwest |
| <input type="checkbox"/> Central | <input type="checkbox"/> Don't remember |

Now think of the ONE outdoor activity that you participated in the MOST during the past year. What type of property did you use the LAST TIME you did this activity?

- | | |
|---|--|
| <input type="checkbox"/> Private | <input type="checkbox"/> County |
| <input type="checkbox"/> Commercial | <input type="checkbox"/> City/town |
| <input type="checkbox"/> Membership only facility | <input type="checkbox"/> Own personal property |
| <input type="checkbox"/> Federal | <input type="checkbox"/> Other |
| <input type="checkbox"/> State | <input type="checkbox"/> Don't know |



With whom did you participate in this activity the MOST recent time? Select all that apply.

- | | |
|---|--|
| <input type="checkbox"/> Alone | <input type="checkbox"/> Friends |
| <input type="checkbox"/> Spouse | <input type="checkbox"/> Work colleagues |
| <input type="checkbox"/> Children | <input type="checkbox"/> Organized group |
| <input type="checkbox"/> Other family members | <input type="checkbox"/> Other |

If new recreation areas were developed or if present recreation areas were improved for the activity you participate in MOST frequently, how long would you be willing to travel to use the area?

- | | |
|--|--|
| <input type="checkbox"/> 5-15 minutes | <input type="checkbox"/> 2 hours |
| <input type="checkbox"/> 16 minutes-1 hour | <input type="checkbox"/> 3 hours |
| <input type="checkbox"/> 1-1.5 hours | <input type="checkbox"/> More than 3 hours |

What would be the MAIN reason why you would not participate in that activity MORE OFTEN?

- | | |
|---|--|
| <input type="checkbox"/> Lack of time | <input type="checkbox"/> Too demanding physically |
| <input type="checkbox"/> Lack of available facilities | <input type="checkbox"/> Family constraints (Children too young, etc.) |
| <input type="checkbox"/> Lack of money | <input type="checkbox"/> Other |
| <input type="checkbox"/> Lack of people with similar interest | <input type="checkbox"/> None |

Who do you think should provide facilities for that activity? Select all that apply.

- | | |
|---|---|
| <input type="checkbox"/> Private land owners | <input type="checkbox"/> County government |
| <input type="checkbox"/> Commercial land owners | <input type="checkbox"/> City/town government |
| <input type="checkbox"/> Membership only facilities | <input type="checkbox"/> Individual users |
| <input type="checkbox"/> Federal government | <input type="checkbox"/> Other |
| <input type="checkbox"/> State government | <input type="checkbox"/> Don't know |

Which of the following outdoor recreation activities would you be MOST LIKELY to participate in if adequate facilities were available? Select all that apply.

- ☐ Walking/hiking/jogging
- ☐ Bicycling
- ☐ Horseback riding
- ☐ Motorized vehicle use (Motorcycle, 4-wheel, ATV, snowmobile)
- ☐ Nature observation/photography
- ☐ Picnicking
- ☐ Playground use
- ☐ Rollerblading/roller skating/skateboarding
- ☐ Court sports (Tennis/basketball/volleyball/horseshoe/shuffleboard)
- ☐ Field sports (Football/soccer/baseball)
- ☐ Golf
- ☐ Camping
- ☐ Boating/water skiing/jet skiing
- ☐ Swimming, scuba, snorkeling
- ☐ Hunting
- ☐ Fishing
- ☐ Winter sports (Skiing, sledding, skating)
- ☐ Trapping
- ☐ Shooting sports
- ☐ Fairs/festivals
- ☐ Remote control (Cars/boats/planes)
- ☐ Lawn games (Badminton/lawnbowling)



If the PUBLIC SECTOR (GOVERNMENT) is to raise money for the development or improvement of outdoor recreation facilities, how should they do it? Select your top 3 answers by putting a 1 next to your first choice, a 2 next to your second choice and a 3 next to your third choice.

- ☐ No more money needed
- ☐ Additional federal funds
- ☐ Increased state income tax
- ☐ Increased state sales tax
- ☐ Lottery/gaming proceeds
- ☐ Increased user fees (Admission charges/facilities, hunting/fishing licenses)
- ☐ Increased special use taxes (Cigarette, liquor)
- ☐ Other local funding
- ☐ No preference

Which of the following BEST describes the MAIN reason you do not have the time to participate in outdoor recreation activities more often?

- ☐ My job demands too much time
- ☐ My family obligations prevent it (Housework, child care, meal preparation, etc.)
- ☐ My school or helping a family member with school prevent it
- ☐ My social obligations or my dependents prevent it (Church, clubs, etc.)
- ☐ I do not have the money
- ☐ Facilities are too far away from me or my family
- ☐ Facilities are not accessible to me or my family

Approximately how many hours PER DAY you spend on each of the following activities?

Watching Television

- | | |
|----------------------------------|---|
| <input type="checkbox"/> Zero | <input type="checkbox"/> 6 hours |
| <input type="checkbox"/> 1 hour | <input type="checkbox"/> 7 hours |
| <input type="checkbox"/> 2 hours | <input type="checkbox"/> 8 hours |
| <input type="checkbox"/> 3 hours | <input type="checkbox"/> 9 hours |
| <input type="checkbox"/> 4 hours | <input type="checkbox"/> 10 hours |
| <input type="checkbox"/> 5 hours | <input type="checkbox"/> More than 10 hours |

Performing household chores (Laundry, cleaning house, yard work, etc.)

- | | |
|----------------------------------|---|
| <input type="checkbox"/> Zero | <input type="checkbox"/> 6 hours |
| <input type="checkbox"/> 1 hour | <input type="checkbox"/> 7 hours |
| <input type="checkbox"/> 2 hours | <input type="checkbox"/> 8 hours |
| <input type="checkbox"/> 3 hours | <input type="checkbox"/> 9 hours |
| <input type="checkbox"/> 4 hours | <input type="checkbox"/> 10 hours |
| <input type="checkbox"/> 5 hours | <input type="checkbox"/> More than 10 hours |

Using your home computer for pleasure (Games, Internet, communications, etc.)

- | | |
|----------------------------------|---|
| <input type="checkbox"/> Zero | <input type="checkbox"/> 6 hours |
| <input type="checkbox"/> 1 hour | <input type="checkbox"/> 7 hours |
| <input type="checkbox"/> 2 hours | <input type="checkbox"/> 8 hours |
| <input type="checkbox"/> 3 hours | <input type="checkbox"/> 9 hours |
| <input type="checkbox"/> 4 hours | <input type="checkbox"/> 10 hours |
| <input type="checkbox"/> 5 hours | <input type="checkbox"/> More than 10 hours |

Shopping for food or clothing

- | | |
|----------------------------------|---|
| <input type="checkbox"/> Zero | <input type="checkbox"/> 6 hours |
| <input type="checkbox"/> 1 hour | <input type="checkbox"/> 7 hours |
| <input type="checkbox"/> 2 hours | <input type="checkbox"/> 8 hours |
| <input type="checkbox"/> 3 hours | <input type="checkbox"/> 9 hours |
| <input type="checkbox"/> 4 hours | <input type="checkbox"/> 10 hours |
| <input type="checkbox"/> 5 hours | <input type="checkbox"/> More than 10 hours |

Talking with family or friends

- | | |
|----------------------------------|---|
| <input type="checkbox"/> Zero | <input type="checkbox"/> 6 hours |
| <input type="checkbox"/> 1 hour | <input type="checkbox"/> 7 hours |
| <input type="checkbox"/> 2 hours | <input type="checkbox"/> 8 hours |
| <input type="checkbox"/> 3 hours | <input type="checkbox"/> 9 hours |
| <input type="checkbox"/> 4 hours | <input type="checkbox"/> 10 hours |
| <input type="checkbox"/> 5 hours | <input type="checkbox"/> More than 10 hours |